Substitute form 1	449A/PTO		Complete if Known			
			Application Number	not yet assigned		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT  (use as many sheets as necessary)			Filing Date	concurrently herewith		
			First Named Inventor	Stephen P. DeLisle		
			Group Art Unit			
			Examiner Name	not yet assigned		
Sheet 1	of	1	Attorney Docket Number	9438-2		

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Examiner Initials*	Cite No.	U.S. Patent Document  Number Kind Code (if known)		Name of Patentee or Applicant of Cited  Document	Date of Publication of Cited Document MM-DD-YYYY	
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			OTH	ER NON PATEN	T LITERATURE DOCUMENTS		
Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published					T
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\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.